



# Permit to Maintain a Commercial Dumpster Application

## SECTION I – To be completed by Applicant

**FEE: \$25.00**

Dumpster Application Commercial for ( ) 1 year.

Business Name: \_\_\_\_\_ Applicant Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Dumpster Address: \_\_\_\_\_

Dumpster Service Co: \_\_\_\_\_ Dumpster Co Address: \_\_\_\_\_

Size of the Dumpster \_\_\_\_\_

*Certification Statement: I understand that the issuance of the "Permit to Maintain a Dumpster" requires that the dumpster must be properly maintained at all time in accordance with Seekonk Board of Health Regulation 9.0.0 and that failure to comply fully will result in fines of \$50.00 per day. Regulation 9.0.0 requires in part that the dumpster be closed at all times when not being filled or emptied, be placed on an impermeable surface not in a public way and that it be kept in sanitary condition.*

Applicant's Certification Signature: \_\_\_\_\_ Phone No: \_\_\_\_\_

Application Date: \_\_\_\_\_ THE ABOVE SIGNATURE ALSO REPRESENTS THAT SUCH APPLICANT HAS AUTHORITY AND APPROVAL FROM THE PROPERTY OWNER TO APPLY AND BE GRANTED A PERMIT TO MAINTAIN A DUMPSTER.

SEND OR RETURN (1) completed Section 1 of the Permit Application, (2) Check for \$25.00 to the Town of Seekonk, Board of Health, 100 Peck St. Seekonk, MA 02771.

## Section II – To be completed by the Office of the Treasurer/Collector and Returned to the Board of Health

The following Table provides the tax liability status of Petitioner and Property Owner:

Type of Review	Paid to Date	Delinquent	Tax Applicability
Real Estate			
Personal Property			
Motor Vehicle Excise			
Disposal Fees			
General Billing			

Seekonk Treasurer: \_\_\_\_\_

Date: \_\_\_\_\_

## Section III – To be completed by the Board of Health & Forwarded to Public Works.

Upon review of the Application Information, Tax Collector Review and Dumpster Service Contract, the Board of Health:

- ( ) Denies the Application: Appeals must be made in accordance with Regulation 9.0.0
- ( ) Grants the "Permit to Maintain a Dumpster" pending a satisfactory dumpster site inspection and Authorized the Public Works Dept. to issue the Applicant a Dumpster Registration Sticker and Trash Fee Exemption.

Seekonk Health Agent: \_\_\_\_\_

Date: \_\_\_\_\_

The Board of Health has issued Dumpster Sticker No. \_\_\_\_\_ to the Applicant Dumpster was inspected on \_\_\_\_\_ and found to comply with applicable regulations

Board of Health: \_\_\_\_\_

Date: \_\_\_\_\_

Expires \_\_\_\_\_